BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	hA	70591	113
O.I.P.E. CLASSIFIER		5	1-11-00
FORMALITY REVIEW	RB	41730	3-3-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	Rejected	N	Non-elected
=	Allowed	I	Interference
– (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim		Date		Claim		Date		Claim		Date
Final	Original			Final	Original			Final	Original	
1		51						101		
2		52						102		
3		53						103		
4		54						104		
5		55						105		
6		56						106		
7		57						107		
8		58						108		
9		59						109		
10		60						110		
11		61						111		
12		62						112		
13		63						113		
14		64						114		
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16		66						116		
17		67						117		
18		68						118		
19		69						119		
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26		76						126		
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29		79						129		
30		80						130		
31		81						131		
32		82						132		
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35		85						135		
36		86						136		
37		87						137		
38		88						138		
39		89						139		
40		90						140		
41		91						141		
42		92						142		
43		93						143		
44		94						144		
45		95						145		
46		96						146		
47		97						147		
48		98						148		
49		99						149		
50		100						150		

If more than 150 claims or 10 actions
staple additional sheet here

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